



Publication Date		Application No.	
Hearing Date		Date Filed	
Vicinity Map		Filing Fee	
Ownership List		Receipt No.	

## APPLICATION FOR VARIANCE OR APPEAL

1. Applicant's Name \_\_\_\_\_
2. Applicant's Address \_\_\_\_\_
3. Telephone (daytime) \_\_\_\_\_ E-mail \_\_\_\_\_
4. Owner's Name \_\_\_\_\_
5. Owner's Address \_\_\_\_\_
6. Legal Description of affected property (attach additional sheet if necessary) \_\_\_\_\_  
\_\_\_\_\_
7. Approximate Street Address \_\_\_\_\_
8. Present Zoning \_\_\_\_\_ Use \_\_\_\_\_
9. Proposed Use \_\_\_\_\_
10. Are there any covenants of record which prohibit the proposed development? YES ☐ (attach copy) NO ☐
11. Nature of variance requested (for variance only): \_\_\_\_\_  
\_\_\_\_\_
12. Nature of appeal requested (for appeal only) \_\_\_\_\_  
\_\_\_\_\_
13. Justification for requested variance or appeal: \_\_\_\_\_  
\_\_\_\_\_
14. List exhibits or plans submitted, including site plan \_\_\_\_\_
15. **Present information in support or each of the (5) five conditions listed in Item No. 15, Page 2 of this application.**  
(See guide for completing Variance Applications for helpful definitions of terms)

**I hereby certify that if this variance application is approved, I will complete construction in accordance with plans submitted and approved by the Board of Zoning Appeals and I agree to abide by all restrictions, conditions, and requirements lawfully binding upon me in this regard.**

Applicant(s) Signature _____	Owner(s) Signature _____
_____	_____
Date: _____	Date: _____

**If the applicant is to be represented by legal counsel or an authorized agent, please complete the following in order that correspondence and communications pertaining to this application may be forwarded to the authorized individual.**

**Name of representative:** \_\_\_\_\_

**Complete Mailing Address, including zip code** \_\_\_\_\_

**Telephone (Business):** \_\_\_\_\_ **E-mail address:** \_\_\_\_\_

**15. (Cont.)**

**A request for a variance may be granted only upon a finding by the Board of Zoning Appeals that all of the following 5 (five) conditions have been met. Present information on this form in support of each of the following criteria (Attach separate sheets if necessary):**

- a. The variance requested arises from such condition which is unique to the property in question and which is not ordinarily found in the same zone and is not created by actions(s) of the property owner or applicant because:**

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- b. Granting the variance will not adversely affect the rights of adjacent property owners or residents because:**

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- c. Strict application of provisions of the zoning ordinance of which the variance is requested, will constitute unnecessary hardship upon the property owner because:**

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- d. The variance desired will not adversely affect the public health, safety, morals, order, convenience, prosperity, or general welfare because:**

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- e. Granting the variance will not be opposed to the general spirit and intent of the zoning ordinance because:**

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